

CLAIM OF: **MONICA AND ANTHONY D. MILES**  
**1945 Mason Mill Road Suite 200**  
**Decatur, Georgia 30033**

For damages alleged to have been sustained as a result of striking a damaged water manhole on November 20, 2009 at 718 Ponce de Leon Avenue, NE.

**BY PUBLIC SAFETY AND LEGAL ADMINISTRATION COMMITTEE:**

**BE IT RESOLVED** by the Council of the City of Atlanta that action of the Department of Law be approved in authorizing payment to **MONICA AND ANTHONY D. MILES** the sum of **\$685.62** in full settlement and satisfaction of all claims, past, present and future, of every kind and character for damages alleged to have been sustained as a result of striking a damaged water manhole on November 20, 2009 at 718 Ponce de Leon Avenue, NE as is more particularly set forth in the within claim; said sum taken from and charged to account **5051.170201.5750002.4310000**.

APPROVED: **ROGER BHANDARI**  
ACTING CITY ATTORNEY

BY:   
**JERRY L. DELOACH**  
DEPUTY CITY ATTORNEY

**FAVORABLE REPORT**

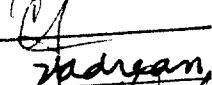
PUBLIC SAFETY &  
LEGAL ADMINISTRATION COMMITTEE

DATE: 1/26/10

CHAIR: 











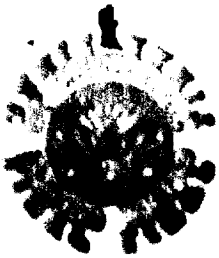




FEB 01 2010

FEB 01 2010

ADOPTED BY  
FEB 01 2010  
COUNCIL



**MUNICIPAL CLERK  
ATLANTA, GEORGIA**

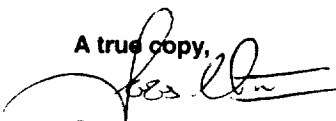
**10-R-0178**

**A RESOLUTION**

**BY PUBLIC SAFETY AND  
LEGAL ADMINISTRATION COMMITTEE**

**BE IT RESOLVED BY** the Council of the City of Atlanta that action of the Department of Law be approved in authorizing payment to **Monica and Anthony D. Miles** the sum of **\$685.62** as full and final settlement and satisfaction of all claims, past, present and future, of every kind and character, for property damages alleged to have been sustained as a result of **striking a damaged water manhole on November 20, 2009 at 718 Ponce De Leon Avenue, NE.** as is more particularly set forth in the within claim; said sum taken from and charged to Account **5051/170201/5750002/4310000.**

A true copy,

  
Deputy Clerk

**ADOPTED by the Atlanta City Council  
APPROVED by Mayor Kasim Reed**

**FEB 01, 2010  
FEB 09, 2010**

## DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 09L0929

Date: December 29, 2009

Claimant /Victim MONICA AND ANTHONY D. MILES

BY:(Atty)(Ins.Co.)

Address: 1945 Mason Mill Road Suite 200 Decatur, Georgia 30033

Subrogation:            Claim for Property damage \$ 685.62 Bodily Injury \$           

Date of Notice: 11/30/09 Method: Written, proper X Improper           

Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X

Date of Occurrence 11/20/09 Place: 718 Ponce de Leon Avenue, NE

Department Watershed Management Bureau: Drinking Water Office:           

Employee involved            Disciplinary Action:           

NATURE OF CLAIM: The claimants allege that they sustained damages as a result of striking a damaged water manhole lid at 718 Ponce de Leon, NE. However, an investigation determined that the city was on notice of problem at this location, but failed to make repairs in a timely manner.

### INVESTIGATION:

Statements: City employee            Claimant            Others            Written            Oral           

Pictures X Diagrams            Reports: Police            Dept Report X Other           

Traffic citations issued: City Driver            Claimant Driver           

Citation disposition: City Driver            Claimant Driver           

### BASIS OF RECOMMENDATION:

Function: Governmental            Ministerial X


Improper Notice            More than Six Months            Other            Damages reasonable X

City not involved            Offer rejected            Compromise settlement           

Repair/replacement by Ins. Co.            Repair/replacement by City Forces           

Claimant Negligent            City Negligent X Joint            Claim Abandoned           

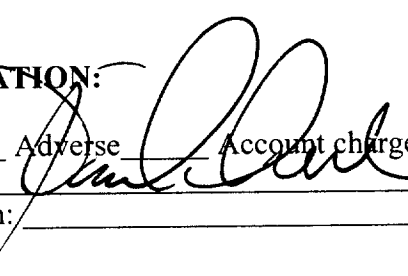
Respectfully submitted,



INVESTIGATOR - LISA CARTER

### RECOMMENDATION:

Pay \$ 685.62 Adverse            Account charged: General Fund            Water & Sewer X Aviation           

Claims Manager:  Concur/date 01/06/10

Committee Action:            Council Action

COUNCIL OF THE CITY OF ATLANTA  
MUNICIPAL CLERK  
City Hall  
55 Trinity Avenue, SW  
Atlanta, Georgia 30303

RE: CLAIM FOR DAMAGES

Today's Date: 11-20-2009

ENTERED - 11-25-09 - SB  
09L0929 - L. CARTER

*Carter*  
*11/24/09*  
*R*

Dear Municipal Clerk:

This is to notify the City of Atlanta that I have suffered damages in the amount of \$ 685.<sup>00</sup> property and/or \$ 0 bodily injury for which I contend the City is liable.

1. Date of incident: 11-20-2009 2. Time of incident: 9:42 AM 3. Police called: NO
4. Location of incident (including street address): PONCE DE LEON (IN FRONT OF CITY HALL EAST)
5. Name of your insurance company: PROGRESSIVE Policy No. 06572505-1
6. State what and how incident occurred: I WAS IN THE LEFT LANE HEADED TOWARD PEACHTREE ST. & I HIT A POT HOLE. MY TIRE BLEW (FRONT PASSENGER SIDE) AND I WAS ABLE TO PULL INTO A DIALYSIS CENTER PARKING LOT AT THE CORNER OF PONCE DE LEON CT. & PONCE DE LEON AVE. I IMMEDIATELY CALLED FOR A SERVICE VEHICLE TO CHANGE TIRE & I TOOK CAR TO DEALERSHIP WHERE
7. ALL ESTIMATES AND DAMAGES ARE SUBJECT TO INSPECTION. THE MAKING OF FALSE CLAIMS WILL RESULT IN YOUR CLAIM BEING DENIED AND MAY RESULT IN CRIMINAL PROSECUTION! THEY TOLD ME THE WHEEL WAS CRACKED. REPAIR WERE MADE.
8. The registered owner must make the claim for vehicle damages, complete the following and attach two (2) estimates of repair and proof of ownership of your vehicle.  
Your vehicle: 2004 MERCEDES-CLK 320 TAG NOTH KDS MONICA MILES  
(Make) (Year) (Tag Number) (Driver's Name)  
City vehicle: \_\_\_\_\_  
(Make) (City Driver's Name) (Department/Bureau)
9. Witness: \_\_\_\_\_
10. The acknowledgement of this claim in no way waives the Sovereign immunity of the City of Atlanta, as granted by State law, nor is it an admission of liability on behalf of the City of Atlanta and/or its employee(s).
11. Claims must be received within 6 months from the date of the event.

I HEREBY SWEAR OR AFFIRM THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.

Monica Miles  
Signature of Claimant

MONICA MILES (MH MILES COMPANY)  
(Print Claimant's Name)

1945 MASON MILL RD. STE #206  
(Address)

DECATUR, GA 30033  
(City, State and Zip Code)

404 6334555 678 575 1874  
(Work Number) (Home Number)

10- R -0178

RCS# 42  
2/01/10  
2:07 PM

Atlanta City Council

REGULAR SESSION

CONSENT I

ADOPT

YEAS: 13  
NAYS: 0  
ABSTENTIONS: 0  
NOT VOTING: 2  
EXCUSED: 0  
ABSENT 1

B Smith	Y Archibong	Y Moore	Y Bond
NV Hall	Y Wan	Y Martin	Y Watson
Y Young	Y Shook	Y Bottoms	Y Willis
Y Winslow	Y Adrean	Y Sheperd	NV Mitchell

CONSENT I

		02-01-10
ITEMS ADOPTED ON CONSENT	ITEMS ADVERSED ON CONSENT	ITEMS ADVERSED ON CONSENT
1. 10-O-0118 2. 10-O-0119 3. 10-O-0120 4. 10-O-0121 5. 10-O-0122 6. 10-O-0123 7. 10-O-0126 8. 10-O-0127 9. 10-O-0128 10. 10-O-0129 11. 10-O-0220 12. 10-O-0221 13. 10-O-0057 14. 10-O-0135 15. 10-R-0134 16. 10-R-0162 17. 10-R-0227 19. 10-R-0164 20. 10-R-0165 21. 10-R-0166 22. 10-R-0169 23. 10-R-0170 24. 10-R-0171 25. 10-R-0222 26. 10-R-0228 27. 10-R-0173 28. 10-R-0174 29. 10-R-0175 30. 10-R-0176 31. 10-R-0177 32. 10-R-0178 33. 10-R-0179 34. 10-R-0180 35. 10-R-0181	36. 10-R-0182 37. 10-R-0183 38. 10-R-0184 39. 10-R-0185 40. 10-R-0186 41. 10-R-0187 42. 10-R-0188 43. 10-R-0189 44. 10-R-0190 45. 10-R-0191 46. 10-R-0192 47. 10-R-0193 48. 10-R-0194 49. 10-R-0195 50. 10-R-0196 51. 10-R-0197 52. 10-R-0198 53. 10-R-0199 54. 10-R-0200 55. 10-R-0201 56. 10-R-0202 57. 10-R-0203 58. 10-R-0204 59. 10-R-0205	